UNITED
NATIONS

E

Economic and Social Council

Distr.
LIMITED

E/ICEF/1996/P/L.59
7 February 1996

ORIGINAL: ENGLISH

UNITED NATIONS CHILDREN'S FUND
Executive Board
Second regular session 1996
9-12 April 1996
Item 3 (d) of the provisional agenda*

FOR ACTION

RECOMMENDATION FOR FUNDING FOR A SHORT-DURATION COUNTRY PROGRAMME**

Federal Republic of Yugoslavia

SUMMARY

The present document contains a recommendation for funding from supplementary funds for the country programme of the Federal Republic of Yugoslavia with a duration of three years that supports activities for a limited period. The Executive Director recommends that the Executive Board approve the amount of $8,400,000 in supplementary funds, subject to the availability of specific-purpose contributions, for the period 1996 to 1998.

* E/ICEF/1996/9.

** In order to meet documentation deadlines, the present document was prepared before aggregate financial data were finalized. Final adjustments, taking into account unspent balances of programme cooperation at the end of 1995, will be contained in the "Summary of 1996 recommendations for general resources and supplementary funding programmes" (E/ICEF/1996/P/L.43 and Add.1).

BASIC DATA
(1993 unless otherwise stated)

Child population (millions, 0-15 years) (1994)	2.6
U5MR (per 1,000 live births) (1994)	23
IMR (per 1,000 live births) (1994)	20
Underweight (% moderate and severe)	..
Maternal mortality rate (per 100,000 live births)	..
Literacy (% male/female)	..
Primary school enrolment (% net, male/female)	..
Primary school children reaching grade 5 (%)	..
Access to safe water (%)	..
Access to health services (%)	..
GNP per capita	$726-$2,895
One-year-olds fully immunized against:	
tuberculosis:	68 per cent
diphtheria/pertussis/tetanus:	85 per cent
measles:	85 per cent
poliomyelitis:	83 per cent
Pregnant women immunized against:	
tetanus:	..

THE SITUATION OF CHILDREN AND WOMEN

1. The population of the Federal Republic of Yugoslavia is estimated at 10.8 million (1994), 95 per cent of whom live in Serbia. A devastating economic and social crisis is having detrimental effects, particularly for the most vulnerable groups. There also have been drops in the real income, a decline in the standard of living, a deterioration in the quality of social and communal services and housing, massive poverty, an increase in economic insecurity and a rise in social problems. In 1994, 38 per cent of the population (4 million people) were poor. For years the Federal Republic of Yugoslavia had a well-developed network of social institutions, almost universal coverage by health services and education, a relatively high quality of social services and very good access to safe water and sanitation. However, since 1990, there has been no improvement in social indicators, and the infant mortality rate (IMR) and the under-five mortality rate (U5MR) have worsened significantly.

2. There are about 700,000 refugees in the country, including more than 215,000 children. The majority live with host families and 100,000 live in collective centres. Providing basic necessities for refugees poses a great burden for the country.

3. The continuous decline in resources allocated to the health sector has significantly diminished good quality health care for all, particularly preventive and primary care services. There are frequent shortages of drugs, medical materials, hygiene supplies and heating fuel which have led to increases

in infections and epidemics. Mortality caused by infectious diseases rose by 115 per cent and the incidence of tuberculosis has increased. Shortages of vaccines, vehicles, spare parts and fuel have resulted in a drop in immunization coverage for children and increases in polio cases in Kosovo and Metohija in 1992-1993.

4. Similarly, there has been a deterioration in nutrition, particularly for infants, preschool and school children, pregnant women and lactating mothers. Every second child hospitalized is anaemic. Schoolchildren are undernourished and anaemic. The percentage of children born prematurely is rising, with one main cause being the pregnant women's diet. The breast-feeding rate is low.

5. The reduction of public education expenditure has resulted in the following: 5-10 per cent of Yugoslav children are not enrolled in primary school; 10-15 per cent of students do not graduate; and 30 per cent of children do not continue their education after completing primary school. There is no out-of-school youth programme to meet the learning needs of children who drop out. Schools have not been maintained properly, with many in deplorable condition, and school equipment and teaching materials are scarce. In-service teacher training has virtually stopped. Teaching practices have not incorporated new and interactive techniques. A modern system to assess students' learning capacity has not been developed, and no real evaluation system exists.

6. The psycho-social development and mental health of children have been threatened by war and stress caused by serious economic and social crises. Those directly exposed to the stresses of war, notably refugee children, are highly vulnerable; 55 per cent of these children experience severe trauma and need therapeutic assistance. Also affected are children placed in social welfare institutions.

PROGRAMME COOPERATION, 1994-1995

7. UNICEF supported transition projects in the areas of primary health care (PHC), nutrition, education and psycho-social care. A priority was the establishment of the expanded programme on immunization (EPI) monitoring system through the provision of computers, software and manuals. Health institutions were supplied with needles and syringes for immunization, cold-chain kits and monitoring cards, and the local vaccines producer received standards and strains for vaccine production. PHC was strengthened and a more cost-effective use of drugs was promoted. Several seminars on the control of diarrhoeal diseases and acute respiratory infections (ARI) have been organized. The rehydration centre at the paediatric clinic in Pristina received supplies and expertise. UNICEF provided basic supplies for outbreaks of typhoid and dysentery and a flood in Montenegro.

8. A national growth monitoring programme involved cooperation with the Institute for Mother and Child and the Institutes of Public Health. More than 150 health centres received growth monitoring kits. UNICEF supplied health institutions with vitamins, minerals and special food for children as well as pregnant and lactating women. A national programme for the protection and promotion of breast-feeding and the Baby-Friendly Hospital Initiative (BFHI) was

introduced in cooperation with the Federal Institute of Public Health. New activities included the establishment of a school for pregnant women and rural mobile counselling agencies.

9. UNICEF provided basic school supplies, teaching aids and sports equipment, mobile classrooms for children in refugee camps and hospitals, and equipment for the education of handicapped children. Seminars for about 1,500 primary school teachers working in particularly difficult circumstances were held in Montenegro. Regional seminars addressed active learning methods and education for tolerance and children's rights for school personnel. Other activities and publications promoted the Convention on the Rights of the Child.

10. UNICEF supported a network of clinical and school psychologists, psychiatrists, primary health workers and school and preschool teachers who were trained to assist children living in war-affected areas. About 80,000 children have received psycho-social services. In addition, 250 paediatricians and 25 interdisciplinary teams were trained to diagnose and provide emergency therapeutic assistance to seriously traumatized children. Forty psychologists and 160 teachers were trained in conflict resolution and the diagnosis of traumatized children. To help children increase their self-esteem, about 80 psychologists and pedagogues and 950 preschool teachers were trained.

11. UNICEF advocated for children's rights and implementation of the Convention on the Rights of the Child in cooperation with the media, authorities and non-governmental organizations (NGOs). The Mayors as Defenders of Children Initiative was launched, and 30 mayors signed the Declaration. Facts for Life was translated, adapted with 20,000 copies in Serbian and 5,000 copies in Albanian. The publishing of the "Report on the Implementation of the Convention on the Rights of the Child in the Federal Republic of Yugoslavia" and the preparation of the "National Plan of Action for the Protection and Development of Children by the Year 2000" were supported.

RECOMMENDED PROGRAMME COOPERATION, 1996-1998

Estimated annual expenditure

(In thousands of United States dollars)

Supplementary funding	1996	1997	1998	Total
Health	1 000	785	615	2 400
Nutrition	240	225	155	620
Education	850	685	620	2 155
Psycho-social support and child care	540	480	315	1 335
Advocacy and social mobilization	90	65	55	210
Project support	680	560	440	1 680
Total	3 400	2 800	2 200	8 400

Programme objectives and strategies

12. The proposed cooperation will assist the Government, NOS and local communities to restore and maintain national capacity for the survival, development and protection of children by preventing further deterioration of the quality and effectiveness of basic services. The programme objectives aim to: restore immunization to per-war levels and achieve universal child immunization; reduce MR to 15 per 1,000 live births and MR to less than 20 per 1,000 live births; reduce the maternal mortality rate to 13 per 100,000 live births; achieve universal access to health education; support the improvement of nutritional status of children and the promotion of breast-feeding; assist in improving hygienic conditions; help the Government to increase access to quality education; and support child development by reducing the psycho-social effects of war and crisis. A major strategy is to improve information management and planning systems and to introduce cost-effective approaches and technologies. As the programmed in the Federal Republic of Yugoslavia are funded exclusively through supplementary funding, close collaboration has been maintained with donors during the previous period. Some consultations with donors have already taken place for the preparation of the new programme of cooperation, and continuous contacts will be pursued as the activities develop.

Maternal and child health

13. The basic strategy for improving maternal and child health (MUCH) care services will include the reallocation of existing resources towards MUCH services based on a cost-effective model for allocating health sector resources. The provision of essential drugs, medical supplies and equipment for PC, as well as health education and health management information systems, will be strengthened, and health outreach services will be established where needed. UNICEF will support the formulation of national policies on the correct case management of MUCH-related diseases. UNICEF will continue to support the Ministry of Health in the implementation of the national policy on essential drugs and other activities related to cost-effective PC. In ELI, UNICEF will assist in the establishment of the rational vaccination calendar, the provision of cold-chain equipment and strengthening the surveillance and reporting capacity of ELI units. ELI will strive to achieve and sustain at least 90 per cent immunization coverage for children against the six vaccine-preventable diseases.

Nutrition

14. The nutrition programme will focus on advocacy for growth monitoring, nutrition surveillance, improved infant feeding practices, information on the benefits of breast-feeding and BFHI. Breast-feeding promotion activities will be intensified and will reach health professionals and the public through seminars, media campaigns, orientation on BFHI for hospital administrators and technical information on the importance of breast-feeding. Nutrition surveillance will facilitate the early detection of micronutrient deficiencies and their elimination through appropriate interventions.

Education

15. UNICEF will support efforts to achieve universal access (100 per cent enrolment) of primary school-age children. UNICEF will assist the Ministry of Education in developing curricula, restructuring teaching programmed and training school and preschool professionals to develop tolerance and awareness of rights among children. UNICEF also will support educational activities and the social integration of children with disabilities. Coverage of preschool education, especially for refugee children and vulnerable groups, will be increased and the use of inter-active pedagogy will be developed. Programmed for the education and development of professionals, institutions and families will be designed. Monitoring and evaluation systems also will be supported. Education services will be adjusted to reach at-risk groups such as refugee children, children of minority groups and gypsy children.

Psycho-social support to children

16. The objectives are to sustain and improve children's social care and increase national capacity for helping children in crisis. The strategy is to ensure that traumatized children, especially refugee children, receive care. School professionals and PC workers will be trained to diagnose symptoms of stress and trauma in children and parents, and provide support. Programmed will be community- and family-based. UNICEF will provide assistance to school psychologists and social workers to enhance their professional skills.

Child care and social welfare

17. Professionals will be trained to work with individuals and families in a holistic way. A "school for parents" will be organized to strengthen individual, marital and parental roles as they relate to child-rearing, including for families with juvenile delinquents. Professional staff serving orphanages and social institutions, as well as foster families, will be trained to provide psycho-therapeutic and educational support to orphaned children. The emotional development and educational needs of children with disabilities will be supported through the provision of educational and didactic material, equipment and supplies for special education institutions.

Advocacy and social mobilization

18. UNICEF will continue to promote the Convention on the Rights of the Child and advocate for the Mayors as Defenders of Children Initiative. The World Summit for Children goals and the national programme of action will be presented to the public through the media. Facts for Life messages will be disseminated and social mobilization activities initiated. The media and NGO networks will be mobilized for child-related issues, especially for child survival, development and protection rights.

Monitoring and evaluation

19. The programme will strengthen an information and monitoring system for measuring achievement of objectives. Information from governmental organizations, other organizations and NOS will be utilized. Regular field visits will assess the effectiveness of UNICEF assistance, and programme

adjustments will be made accordingly. A formal mid-term programme review will make necessary adjustments. A programme evaluation will be carried out jointly with participating governmental organizations and other partners towards the end of 1998. The necessary lessons will be drawn to prepare the main lines of future interventions.

Emergency preparedness plan

20. During 1995, massive numbers of people have moved into the Federal Republic of Yugoslavia from Croatia and Bosnian Serb areas, creating tremendous pressure on the already over-burdened social service infrastructure. It is, therefore, important that emergency preparedness becomes part of the country programme contingency plan. The strategy will focus on strengthening the capacity of partners in early preparedness and response to sudden emergencies through training, orientation and the provision of emergency supplies. The operational capacity of UNICEF also will be reinforced for an effective and prompt emergency response.

Collaboration with other agencies

21. UNICEF will increase emphasis on cooperation with other United Nations agencies, including the United Nations Development Programme, the Office of the United Nations High Commissioner for Refugees, the World Health Organization and the United Nations Educational, Scientific and Cultural Organization, and with both local and international NGOs.

Programme support

22. UNICEF assistance is managed by a sub-office in Belgrade, with a project office in Podgorica. UNICEF recently has established a presence in Pristina for closer coordination with partners.